



Parental Consent Form For Participation In All Club Activities

The information you supply in this form is important in the event of an accident, illness or other emergency. It will only be used by the people responsible for safeguarding your child in the Club's squash related activities. Please complete in BLOCK CAPITALS using black ink.

Child's Personal Details	
Last name:	First name:
Date of birth:	Age:
Address:	
Postcode:	
Home:	Mobile:

Details For First Person We Should Contact In An Emergency		
Last name:	First names:	
Relationship to child:		
Address:		
Postcode:		
Home:	Mobile:	Work:

Details For Second Person We Should Contact In An Emergency		
Last name:	First names:	
Relationship to child:		
Address:		
Postcode:		
Home:	Mobile:	Work:

Medical Information

Please list any medical details that you feel we should know about, such as asthma, heart complaints, diabetes, epilepsy, injury etc:

Is your child on any medication to treat the above conditions:

If so, please supply details:

Doctor's name and address:

Doctor's telephone number:

Does your child have any known allergies such as a reaction to penicillin?:

If so, please supply details:

Parent or Guardian Consent Declaration

My child is in good health and I consider him/her capable of taking part in club activities. I have completed the medical details and consent that, in the event of any illness/accident, any necessary treatment can be administered to my child, which may include the use of anaesthetics. I also understand that while coaches and team personnel will take every precaution to ensure that accidents do not happen, they cannot necessarily be held responsible for any loss, damage or injury suffered.

I give my permission for my child to be carried in other persons vehicles and to be driven alone if the situation becomes unavoidable.

I give consent to my child's performance being publicised as necessary and that such material can be contained on the Internet. I am also aware that photographs may be taken during the event for promotional purposes, such as use on the Club website.

I do/do not (please delete as applicable) give consent for my child to feature in such photos.

I give my permission for my child to be accepted on to the Club's Internet squash ladder, take full responsibility for ensuring that my child complies with the terms of service for the ladder and full responsibility for the decision to supply any contact information on the ladder website.

Parent/Guardian Name (please print):

Signature of above named person: